

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NUR		11-28-01
O.I.P.E. CLASSIFIER		11	1-16-01
FORMALITY REVIEW	MM	920	12-10-01
RESPONSE FORMALITY REVIEW	LC	1024	3-19-02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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3/19/02

12/10/01